

FARM MUTUAL INSURANCE COMPANIES

Indiana Instructions for 2006 Annual Statement Filing

1. All Annual Statements must be prepared in Excel format.
2. Changes to the 2006 Annual Statement as the result of correspondence with this Department, or due to the requirements of other Insurance Departments of which this Department has been notified, should be taken into consideration when preparing the 2006 Annual Statement.
3. Changes resulting from a Department Examination must be reflected in this Statement.
4. Return this form with the Annual Statement filing.

FILING INSTRUCTIONS	
Required Filings Contact Person:	Brenda Lear at blear@idoi.in.gov or (317) 232-5692
Mailing Address:	Attn: Financial Services Indiana Department of Insurance 311 W. Washington St., Suite 300 Indianapolis, IN 46204-2787
Mailing Address for Filing Fees:	Bank Lock Box Indiana Department of Insurance Post Office Box 636 Indianapolis, IN 46206-0636
Contact for questions:	Debra Graves, 317-232-1993
Original Signatures:	Annual Statements must have original signatures.
Signature/Notarization/Certification:	Annual Statements must have an original notarization.

Company Name: _____

NAIC Company Code: _____

Contact: _____ Phone: _____

Checklist	Required filings for Indiana	Number of Copies
	Completed Instruction Checklist	2
	Annual Statement (8 1/2" x 14")	2
	Statement Filing Fees (Indiana Fee & Retaliatory Fee Statement)	1